UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D **SECTION 4(6), AND/OR**

UNIFORM LIMITED OFFERING EXEMPT

Name of Offering (check if this is an amendment and name has changed, and indicate Gideon Hixon DFJ Fund, LLC limited liability company membership interests offering (1st Close)

Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☑ Rule 506 □ Section 4(6) □ ULOE

Type of Filing : □ New Filing : □ Amendment

BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer.

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Gideon Hixon DFJ Fund, LLC

Address of Executive Offices (Number and Street, City, State, Zip Code)

315 E. Commerce St., #300, San Antonio, TX 78205

Address of Principal Business Operations

(if different from Executive Offices)

(210) 225-3053

(Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

Brief Description of Business

Type of Business Organization

☐ corporation

☐ limited partnership, already formed □ business trust

☐ limited partnership, to be formed

□ Estimated

Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization:

(Enter two-letter U.S. Postal Service abbreviation for State:

Month September Year

limited liability company ■ Actual

ix other (please specify):

CN for Canada; FN for other foreign jurisdiction)

Telephone Number (Including Area Code)

OMB Number:

Prefix

Expires: April 30, 2008 Estimated average burden

SEC USE ONLY

DATE RECEIVED

hours per response

3235-0076

16.00

Serial

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D et seq. or 15 U.S.C. 77d(6).

QM 17 CFR 230.501

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: 2. Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☐ Beneficial Owner □ Director ☑ General and/or ☐ Executive Officer Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Foster, Frank H. Business or Residence Address (Number and Street, City, State, Zip Code) 2934 Torito Rd., Santa Barbara, CA 93108 ☑ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Hixon, Dylàn **Business or Residence Address** (Number and Street, City, State, Zip Code) 138 W. 82nd Street, New York, NY 10024 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) Hixon, Eric Business or Residence Address (Number and Street, City, State, Zip Code) 123 Island Drive, Palo Alto, CA 94301 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) Simpson, Bryan, Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 1061 Riverside Avenue, Jacksonville, FL 32204 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ■ General and/or Managing Partner Full Name (Last name first, if individual) Geiger, Debra Business or Residence Address (Number and Street, City, State, Zip Code) 2900 East Valley Road, Santa Barbara, CA 93108 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Gideon Hixon Management Company, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 315 E. Commerce Street, #300, San Antonio, TX 78205

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INFO	RMATIO	N ABOU	T OFFER	ING				
Has the issuer sold,	or does the	e issuer inte	end to sell,	, to non-ac	credited in	vestors in t	his offering	g?		.,	Yes	No 🗷
Answer also in App	endix, Col	umn 2, if f	iling under	r ULOE.							_	_
What is the minimum investment that will be accepted from any individual?											N/A	A
Does the offering permit joint ownership of a single unit?											Yes	No
Enter the informat commission or simi person to be listed i list the name of the dealer, you may set	ion reques lar remune s an associ broker or forth the in	ted for earation for a ated person dealer. If	sch person solicitation or agent more that for that br	who has n of purcha of a broken n five (5) p oker or de	been or asers in con ror dealer or dealer or dealer aler only.	will be pa inection wi registered vi be listed a	id or give ith sales of with the SE re associate	en, directly securities in EC and/or well persons	or indirection the offer with a state of such a b	etly, any ing. If a or states, roker or	E	
Full Name (Last na	me first, if	individual)					····			<u>.</u>		
Business or Resider	ice Addres	s (Number	and Street	, City, Stat	te, Zip Cod	le)				_	,_ ,_	
Name of Associated	Broker or	Dealer					,					
State in Which Pers	on Listed I	las Solicite	ed or Inten	ds to Solic	it Purchase	ers						
(Check "A	.ll States" o	or check in	dividual St	tates)	***************************************	***********	••••••		************			All States
{ AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last nar	ne first, if	individual)										
Business or Residen	ice Addres:	s (Number	and Street	, City, Stat	e, Zip Cod	e)				 -		
Name of Associated	Broker or	Dealer					 -					
State in Which Pers	on Listed I	las Solicite	d or Inten	ds to Solic	it Purchase	ers						
(Check "A	il States" o	or check ind	dividual St	ates)	******************************	***************************************	••••••	••••••••		**************		All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name (Last nar	ne first, if	individual)										
Business or Residen	ice Address	s (Number	and Street	, City, Stat	e, Zip Cod	e)				•	· · ·	
Name of Associated	Broker or	Dealer										
State in Which Pers	on Listed F	las Solicite	d or Inten	ds to Solic	it Purchase	ers						
(Check "A	Il States" o	or check inc	dividual St	ates)			•••••					All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA }	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold.	the aggregate offering price of securities included in this offering and the total amount Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check and indicate in the columns below the amounts of the securities offered for exchange and neged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	□ Common ☑ Preferred		
	Convertible Securities (including warrants)	0	\$0
	Convertible occurring (including warrants).	· ·	ΨΟ
	Partnership Interests	\$	\$0
	Other (Specify) limited liability company membership interests	\$6,000,000.00	\$6,000,000.00
	Total	\$6,000,000.00	\$6,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
this offering a indicate the nu	the number of accredited and non-accredited investors who have purchased securities in and the aggregate dollar amounts of their purchases. For offerings under Rule 504, amber of persons who have purchased securities and the aggregate dollar amount of their he total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
Accredited Inv	restors	24	\$6,000,000.00
Non-accredited	1 Investors	N/A	N/A
Total (for filin	gs under Rule 504 only)	N/A	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
securities sold	s filing is for an offering under Rule 504 or 505, enter the information requested for all by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Not Applicable.		
Туре	of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
issuer. The i	Furnish a statement of all expenses in connection with the issuance and distribution es in this offering. Exclude amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0

	Printing and Engraving Costs	••••			\$0		
				X	\$125,000.00		
	Accounting Fees		•••••		\$0		
					\$0		
	· · · · · · · · · · · · · · · · · · ·	inders' fees separately)			\$0		
				×	\$2,125.00		
	Total	······································					
b. - Question 1 and "adjusted gross programs"	total expenses furnished in resp	he aggregate offering price given in response to Paonse to Part C - Question 4.a. This difference is the	art C 1e		\$5,872,875.00		
used for each of the and check the box	he purposes shown. If the amount to the left of the estimate. The	ant for any purpose is not known, furnish an estimate total of the payments listed must equal the adjuste	ate				
				Payments to Officers, Directors, & Affiliates	Payments To Others		
Salaries and fees .				\$0 🗆	\$0		
Purchase of real e	state			\$0 □	• \$0		
Purchase, rental o	r leasing an installation of macl	ninery and equipment		\$0 □	\$0		
Construction or le	asing of plant buildings and fac	cilities		\$0 □	\$0		
				\$0 □	\$0		
_		•		\$0 □	\$0		
• •				\$0 ₺			
- -				\$0 □			
· •				\$0 ☒			
				V -	\$5,872,875.00		
		D. FEDERAL SIGNATURE					
signature constitu	tes an undertaking by the issuer	to furnish to the U.S. Securities and Exchange Co	mmiss	ion, upon written reque			
ssuer (Print or Ty	/pe)	Signature		Date			
Other Expenses (identify) filing fees Total b. Enter the difference between the aggregate offering price given in respon- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference 'adjusted gross proceeds to the issuer." 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed for each of the purposes shown. If the amount for any purpose is not known, furnish and check the box to the left of the estimate. The total of the payments listed must equal the gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Salaries and fees Purchase, rental or leasing an installation of machinery and equipment. Construction or leasing of plant buildings and facilities. Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another sesser pursuant to a merger). Repayment of indebtedness. Working capital Other (specify) Column totals. Total Payments Listed (column total added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized perso signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Excha nformation furnished by the issuer to any non-accredited investor pursuant to paragraph (b) sesuer (Print or Type) Gideon Hixon DFJ Fund, LLC Name of Signer (Print or Type) Managing Member of Gideon Hixon Mar				December 2	o, 2007		
	Print or Type)			I			
Frank H. Foster		Managing Member of Gideon Hixon Manageme	nt Con	pany, LLC, the Manag	ing Member		
		1					
<u> </u>		ATTENTION					
Intention	al misstatements or omiss		latio	ıs. (See 18 U.S.C. 1	.001).		
	Affiliates Affiliates Payments 10 Others ries and fees						

E. STATE SIGNATURE

1.	Is any party described in 17 CFR 230.252 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		X
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) Gideon Hixon DFJ Fund, LLC	Signature	Date December 2.007
Name (Print or Type) Frank H. Foster	Title (Print or Type) Managing Member of Gideon Hixon Manageme	ent Company, LLC, the Managing Member

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of in amount purcl (Part C	5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	\$6,000,000 Limited Liability Company Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL		х	Same as above	0		0			X
AK		х	Same as above	0		0		_	х
AZ		х	Same as above	0		0			х
AR		х	Same as above	0		0			х
CA		х	Same as above	8	\$1,300,000	0			Х
СО		х	Same as above	1	\$50,000	0			Х
СТ		х	Same as above	0	•	0			х
DE		х	Same as above	0		0	·		Х
DC		х	Same as above	0		0			Х
FL		х	Same as above	1	\$150,000	0			х
GA		х	Same as above	0		0			Х
HI		Х	Same as above	0		0			х
ID		х	Same as above	0		0			Х
IL		х	Same as above	0		0			х
IN		х	Same as above	0		0			Х
ΙA		х	Same as above	0		0			Х
KS		х	Same as above	0		0			Х
KY		х	Same as above	0		0			х
LA		Х	Same as above	0		0			Х
ME		х	Same as above	0		0			Х
MD		х	Same as above	0		0			Х
MA		Х	Same as above	3	\$1,000,000	0			х
MI		Х	Same as above	0		0			х
MN		Х	Same as above	2	\$500,000	0			х
MS		х	Same as above	0		0			х
МО		х	Same as above	0		0			Х

APPENDIX

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1) \$6,000,000		Type of in amount purc (Part C	5 Disqualification Under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Liability Company Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT		х	Same as above	1	\$100,000	0			х
NE		х	Same as above	0		0			х
NV		х	Same as above	0		0			х
NH		х	Same as above	0		0			х
NJ		Х	Same as above	0		0			х
NM		х	Same as above	0		0			Х
NY		Х	Same as above	0		0			Х
NC		Х	Same as above	0		0			х
ND		х	Same as above	0		0			Х
ОН		х	Same as above	0		. 0			х
ок		х	Same as above	0		0			Х
OR		х	Same as above	1	\$150,000	0			х
PA		х	Same as above	0		0			х
RI		х	Same as above	0		0			X
SC		х	Same as above	0		0			х
SD		х	Same as above	0		0			х
TN		х	Same as above	0		0			х
TX		х	Same as above	5	\$2,550,000	0			Х
UT		х	Same as above	0		0			Х
VT		Х	Same as above	2	\$200,000	0			х
VA		Х	Same as above	0		0			х
WA		Х	Same as above	0		0			х
WV		Х	Same as above	0		0			х
WI		Х	Same as above	0		0			х
WY		Х	Same as above	0		0			Х
PR		х	Same as above	0		0			х